

NH Public Utilities Commission  
REC Aggregator Portal

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NHPUC 22APR'16 PM 2:37

New Users [CLICK HERE](#) to setup your account for this form. Creating an account enables you to partially complete the form and return later to finish it or to make changes after the form is submitted. Be sure to create your account **BEFORE** entering information into the form, or the information will be lost.

Existing Users [CLICK HERE](#)

Basic Information

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Who is submitting this request?

Aggregator

Aggregator Batch Number

KE042016

Are you registered in NH

- ☒ Yes  
☐ No

Aggregator name

Knollwood Energy - 14625

NH Reg #

Aggregator Email

karenton@knollwoodenergy.com

Other Aggregator name

Other aggregator email address

Facility Name

Facility Owner Name

Matthew Reed

Facility Owner email

mreed94@gmail.com

Owner Phone

330-277-1236

Facility Address

104 Allen Rd

Facility Town/City

Bow

Facility State

NH

Facility Zip

03304

Is the facility address the same as the owner's mailing address

☒ Yes

☐ No

Mailing Address

Mailing Town/City

Mailing State

Mailing Zip

Primary Contact

Karen Tenneson

Primary Contact

Facility Primary Contact

karenton@knollwoodenergy.com

Other Email Address

## Facility Information

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Class

Utility

Other Utility Name

To obtain a GIS ID contact:

James Webb

408 517 2174

jwebb@apx.com

GIS ID (include "NON")

Date of Initial Operation

Facility Operator Name, if applicable

Panel Quantity

Panel Make

Panel Model

Panel Rated Output

System capacity based on panels

Inverter Quantity

1

Inverter Make

Solar Edge

Add'l Inverter Quantity

NA

Additional Inverter Make

None

Rated Output - Primary Inverter

240

Rated Output - Additional Inverter

System capacity based on single inverter make

240

System capacity based on two inverter types

System capacity in kW as stated on the interconnection agreement

8.235

Revenue Grade Meter Make

Itron

Was this facility installed directly by the customer (no electrician involved)?

- ☐ Yes  
☒ No

Electrician Name & Number

Kim Frase4146M

Other Electrician Name & Number

Installation Company

Frase Electric, LLC

Other Installation Company Name

Other Inst. Company Address

Other Inst. Company City

Other Inst. Company State

Other Inst. Company Zip

Independent Monitor Name & Company

Paul Button - Energy Audits Unlimited

Other Monitor Name and Company

Is the installer also the equipment supplier?

- ☒ Yes  
☐ No

Equipment Vendor

Please attach your completed interconnection agreement including Exhibit B.

[https://fs30.formsite.com/jan1947/files/f-5-99-6597163\\_PhX67wJ9\\_MReed\\_COC1.pdf](https://fs30.formsite.com/jan1947/files/f-5-99-6597163_PhX67wJ9_MReed_COC1.pdf)

The project described in this application will meet the metering requirements of PUC 2506 including:

Electricity generation in megawatt hours shall be reported to the GIS quarterly with a statement that the submission is accurate by the owner of the source, the independent monitor or a designated representative.

A revenue quality meter is used to measure the electricity generated.

The facility owner has certified to the independent monitor that the meter operates according to manufacturing standards.

The meter shall be maintained according to the manufacturer's recommendations.

The project is installed and operating in conformance with applicable building codes.

A copy of the facility's interconnection agreement is attached.

Please attach additional document here

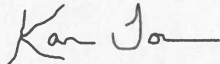
[https://fs30.formsite.com/jan1947/files/f-5-168-6597163\\_UutwXV5q\\_Matthew\\_Reed\\_contract\\_part\\_3\\_-](https://fs30.formsite.com/jan1947/files/f-5-168-6597163_UutwXV5q_Matthew_Reed_contract_part_3_-)

Please attach additional document here

[https://fs30.formsite.com/jan1947/files/f-5-173-6597163\\_W73IHxqE\\_MReed\\_SPIA.pdf](https://fs30.formsite.com/jan1947/files/f-5-173-6597163_W73IHxqE_MReed_SPIA.pdf)

Aggregator statement of accuracy

Sign your name using a mouse or, if you are using a touch-screen device, a stylus or other pointer.



Print Name

Karen Tonnesen

Date Signed

04/20/2016



UNITIL ENERGY SYSTEMS, INC.  
INTERCONNECTION STANDARDS FOR INVERTERS  
SIZED UP TO 100 KVA (Continued)

**Exhibit B - Certificate of Completion for Simplified Process Interconnections**

Installation Information:

Check if owner-installed

Customer(print): Massiel Reed  
Mailing Address: 104 Allen Rd  
City: Bow State: NH Zip Code: 03304  
Telephone (Daytime): 330 277 1236 (Evening): 330 277 1236  
Facsimile Number: \_\_\_\_\_ E-Mail Address: nrred94@gmail.com

Address of Facility (if different from above): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Electrical Contractor's Name (if appropriate): Fuse Electric LLC  
Mailing Address: 784 Whittier Hwy  
City: So Tamworth State: NH Zip Code: 03883  
Telephone (Daytime): 603-284-6618 (Evening): 284-6618  
Facsimile Number: 284-6343 E-Mail Address: km@fuseelectric.com  
License number: 4146M

Date of approval to install Facility granted by the Company: \_\_\_\_\_

Application ID number: 1201

Inspection:

The system has been installed and inspected in compliance with the local Building/Electrical Code of

Bow / Merrimack  
(City/County)

Signed (Local Electrical Wiring Inspector, or attach signed electrical inspection): Bruce Butterick

Name (printed): Bruce Butterick

Date: 10-5-15

As a condition of interconnection you are required to send/fax a copy of this form to:

**Generator Interconnection Applications**  
Unitil  
325 West Road  
Portsmouth, NH 03801  
Fax: 603-294-5226



Until

GIDH/201

INTERCONNECTION STANDARD FOR ALL SYSTEMS  
SIZED UP TO 100 KVA (Continued)

**Simplified Process Interconnection Application and Service Agreement**

**Contact Information:**

Date Prepared: 5/2/15

Legal Name and address of Interconnecting Customer (or, Company name, if appropriate)

Customer Name (print): Massiel Reed Contact Person, if Company: \_\_\_\_\_

Mailing Address: 104 Allen Rd

City: Bow State: NH Zip Code: 03304

Telephone (Daytime): \_\_\_\_\_ (Evening): 330 277 1236

Facsimile Number: \_\_\_\_\_ E-Mail Address: mreed94@gmail.com

**Alternative Contact Information (e.g., system installation contractor or coordinating company, if appropriate):**

Name: Fase Electric LLC

Mailing Address: 7261 Whittier Hwy

City: So. Tamworth State: NH Zip Code: 03283

Telephone (Daytime): 603 284-6618 (Evening): 284-6618

Facsimile Number: 284-6343 E-Mail Address: long@faseelectric.com

**Electrical Contractor Contact Information (if appropriate):**

Name: Same as above. Telephone: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

**Facility Information:**

Address of Facility: 104 Allen Rd

City: Bow State: NH Zip Code: 03304

Electric Service Company: \_\_\_\_\_ Account Number: 1169995-1046754 Meter Number: AAE0000463012

Inverter Manufacturer: SolarEdge Model Name and Number: SE 760A-US Quantity: 1

Nameplate Rating: 3.55 (kW) 8.5 (kVA) 240 (AC Volts) Single ☒ or Three \_\_\_\_\_ Phase

System Design Capacity: 8.5 (kW) 9.1 (kVA) \_\_\_\_\_ (kVA)

Net Metering: If Renewably Fueled, will the account be Net Metered? Yes ☒ No \_\_\_\_\_

Prime Mover: Photovoltaic ☒ Reciprocating Engine ☐ Fuel Cell ☐ Turbine ☐ Other \_\_\_\_\_

Energy Source: Solar ☒ Wind ☐ Hydro ☐ Diesel ☐ Natural Gas ☐ Fuel Oil ☐ Other \_\_\_\_\_

UL 1741.1 (IEEE 1547.1) Listed? Yes ☒ No \_\_\_\_\_

Estimated Install Date: 4/15/15 Estimated In-Service Date: 4/30/15

**Customer Signature**

I hereby certify that, to the best of my knowledge, all of the information provided in this application is true and I agree to the Terms and Conditions on the following page:

Interconnecting Customer Signature: M Reed Title: Owner Date: 5/4/15

Please attach any documentation provided by the inverter manufacturer describing the inverter's UL 1741 listing.

**Approval to Install Facility (For Company use only)**

Installation of the Facility is approved contingent upon the terms and conditions of this Agreement, and agreement to any system modifications, if required (Are system modifications required? Yes \_\_\_\_\_ No ☒ To be Determined \_\_\_\_\_):

Company Signature: \_\_\_\_\_ Title: MBR D.S.F. Date: 5/4/2015

Company waives inspection/Witness Test? Yes \_\_\_\_\_ No \_\_\_\_\_



## New Hampshire PUC REC Certification Application Owner Statements

The information provided on this application for New Hampshire Renewable Energy Certificate eligibility is accurate to the best of my knowledge and I authorize Knollwood Energy to act on my behalf in filing said application.

The project described in this application will meet the metering requirements of PUC 2506 including:

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A copy of the facility's interconnection agreement is attached.

Matthew Reed

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Printed Name of signature owner

Matthew Reed

Matthew Reed (Apr 17, 2016)

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Signature of system owner